# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

ITOFFEE	R,	CAME
	1	

Write the full name of each plaintiff.

18CV3774

(include case number if one has been assigned)

-against-

DAVID S. ALLEE MORGAN LEHMAN GALLER **COMPLAINT** 

Do you want a jury trial?

☐ Yes ☐ No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

### NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

### I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.
What is the basis for federal-court jurisdiction in your case?
✓ Federal Question
☐ Diversity of Citizenship
A. If you checked Federal Question
Which of your federal constitutional or federal statutory rights have been violated?  L) FLEDERAL TRADEMARIC INFRINGEMENT UNDER 15 U.S.
i) FEDERAL UNFAIR COMPETITION UNDER 15 U.S.C.
iii) COPYPIENT INFPINEEMENTS
iv) STATUTORY DAMAGES UNDER 17 USE \$ 504
B. If you checked Diversity of Citizenship
1. Citizenship of the parties
Of what State is each party a citizen?
The plaintiff, ITOFFEE R. GAME, is a citizen of the State of (Plaintiff's name)
NEW YORK
(State in which the person resides and intends to remain.)
or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff

If the defendant is an individual:	
The defendant, DAVID C. AL (Defendant's name)	, is a citizen of the State of
HOW YORK	
or, if not lawfully admitted for permane subject of the foreign state of	ent residence in the United States, a citizen or .
If the defendant is a corporation:	•
111	HMAM Sister borated under the laws of
the State of NEW YORK	
and has its principal place of business ir	n the State of
or is incorporated under the laws of (for	eign state)
and has its principal place of business ir	NEW YORK
If more than one defendant is named in the information for each additional defendant.	complaint, attach additional pages providing
II. PARTIES	
A. Plaintiff Information	
Provide the following information for each pages if needed.	plaintiff named in the complaint. Attach additional
MOFFEE R.	CAYVE
First Name Middle Initia	l Last Name
2010 POWELL AVE.	APT. 2F
Street Address	
BRONX	NY 10472
County, City	State Zip Code
917 952 5661	MOPPLE GAYLE @ YAHOO. COM
Telephone Number	Email Address (if available)

### B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:	DAVID S	. ALLE	escription Particular Particular		
	First Name	Last Nar	ne		
	ARTIST/PH	DTDGRAP	TER		
	Current Job Title (or o		16.		
		th STPLEE			
	Current Work Address	(or other address	s where defenda	ant may be served)	
	NEW YORK	NY	ODII		
	County, City	<del></del>	tate	Zip Code	And Add Add Add and the And Add Annual Annua
Defendant 2:	MORGAM	LEHMA	M GAU	EPY	
	First Name	Last Nar	ne		
	REPRESENTIV	E GALL	EPY FO	OR DAVID	ALLEE
	Current Job Title (or o	ther identifying i	nformation)		
	534 W 21	ith ST		,	
	Current Work Address	(or other addres	s where defenda	ant may be served)	<del></del>
	NEW YORK	< r	$\ell \gamma$	10011	
	County, City	S	tate	Zip Code	
Defendant 3:					
	First Name	Last Nar	me		<del></del>
<i>,</i>	Current Job Title (or o	ther identifying in	nformation)		<del></del>
	Current Work Address	(or other addres	s where defenda	ant may be served)	
	County, City	S	tate	Zip Code	M.A. Inches

	Defendant 4:				
		First Name	Last Name		
		Current Job Title (or	other identifying information)		
		Current Work Addre	ess (or other address where defer	ndant may be served)	
	,	County, City	State	Zip Code	
	III. STATEME	ENT OF CLAIM			
	Place(s) of occur	rence: HT	W YORK CUT	J , HY	
	Date(s) of occurr	rence:	016		
	FACTS:				
		at each defendant pe	oort your case. Describe what ha rsonally did or failed to do that		
1	. THE DE	PENDANT, I	AVID S. ALLEE	used the	
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			ON, COMPENSAT	IOM, OR	
			HE PLAINTHE.		
2.	THE PU	AINTIPF, L'	TOFFEE R. GAYL	E HOLOS A	-
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			R THE CATEGO		
	PROVIDIN	16 PETAIL	SERVICES INC	unding works	

- PAMIN S. ALLEE AND PEPPESENTING GALLERY
  HAVE EXPLOITED & CAPITALIZED OFF THE
  PLANTUFFIC LYPT WE ALL! BORAND NAME

  RECOGNITION.
- 3. POPMER ATTORNEY OF PLANNTHE, LAWFLE MARSHAUL,
  GUBMITTED A CEACH & DESIGT LETTER OF

  4/23/2017. THE DEFENDANT, DAVID S. ALLEE

  HAS YET TO PESPOND OR ACKNOWLEDGE

  RECEIPT OF SAID LETTER.
- 4. THE UNAUTHORIZED USE OF PLAINTIFF'S

  TPADEMARK & WORK OF ART OR DERIVATIONS

  OF PLAINTIFF'S COPYRIGHT REGISTRATIONS IN

  DEFENDANT'S EXHIBITION WITHOUT PERMISSION;

  CONSENT, COMPENSATION OR ATTPIBUTION CONSTITUTES

  (AS DESCRIBED BY PLAINTIFF'S FORMER

  Counsel)
  - 15 U.G.C 8/114(a)

IN U.S.C. \$ 1125(a)  WINDER RELATED STATE LAWS.  WO COPYRIGHT INFRINGEMENTS  V) STATUTORY DAMAGES UNDER 17 U.S.C. 2504  THE PHINTIPE, ITOPPEE R. GAYLE WILL REQUIRE  AN APPROPRIATE MONETARY PAYMENT OF  \$ 75,000 TO COMPENSATE FOR THE DAMAGES  CAUSED AS A RESULT OF SAID VIOLATIONS.  INJURIES:  If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.
UNDER RELATED STRIE LAWS.  W) COPYRIGHT INFRIMENTS  V) STATUTORY DAMAGES UNDER 1745C 2504  THE PLAINTIPF, ITUPPEE R. GAYLE MILL RECRUIRD AN APPROPRIATE MONETARY PAYMENT OF  475,000 TO COMPENSATE FOR THE DAMAGES  CAUSED AS A RESULT OF SAID VIOLATIONS.  INJURIES:  If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.
W) COPYRIGHT INFRINGEMENTS  V) STATUTORY DAMAGES UNDER 1745 7504  THE PUMINIPF, ITUPPEE R. GAYLE WILL REQUIRE AN APPROPRIATE MONETARY PAYMENT OF  475,000 TO COMPENSATE FOR THE DAMAGES  CAUSED AS A RESULT OF SAID VIOLATIONS.  INJURIES:  If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.
STATUTORY DAMAGES UNDER 1746C 2504  THE PLAINTIPF, ITOPPEE R. GAYLE WILL REQUIRE AN APPROPRIATE MONETARY PAYMENT OF  \$\frac{4}{75},000\tau \tau compensate for the damages  CAUSED AS A RESULT OF SAID VIOLATIONS.  INJURIES:  If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.
THE PLAINTIPE, ITOPPEE R. GAYLE WILL REQUIRE AN APPROPRIATE MONETARY PAYMENT OF \$75,000 TO COMPENSATE FOR THE DAMACES CAUSED AS A RESULT OF SAID VIOLATIONS.  INJURIES: If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.  IV. RELIEF
AN APPROPRIATE MONETARY PAYMENT OF  \$75,000 TO COMPENSATE FOR THE DAMACES  CAUSED AS A RESULT OF SAID VIOLATIONS.  INJURIES: If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.  IV. RELIEF
CAUSED AS A RESULT OF SAID VIOLATIONS.  INJURIES:  If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.  IV. RELIEF
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If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.  IV. RELIEF
IV. RELIEF
State briefly what money damages or other relief you want the court to order.
THE PHINTIFF ITOFFEE R. GAYLE WILL
REQUIRE AN APPROPRIATE MONETARY PAYMENT
OF \$ 75,000 TO COMPENSATE FOR THE
DAMAGES CAUSED AS A RESULT OF SAID
VIOLATIONS.

### V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to

proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Plaintiff's Signature Dated GAYLE LTOFFEE Middle Initial First Name Last Name 2F 2010 DUME Street Address KRANX State County, City 952 Email Address (if available) Telephone Number

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically: ☐ Yes ☐ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.

# **ARTWEALL NYC**

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DAVID S. ALEE

### David S. Allee

David S. Allee, pro photographer, has exhibited a photograph of Art we All NYC artwork in solo exhibition, Chasing Firefly, at **Morgan Lehman Gallery** on 01/05/17 - 02/11/17 without consent

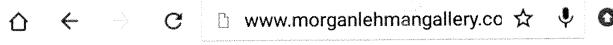
 $\mathbb{R}^{d}_{M}f_{n}$ 

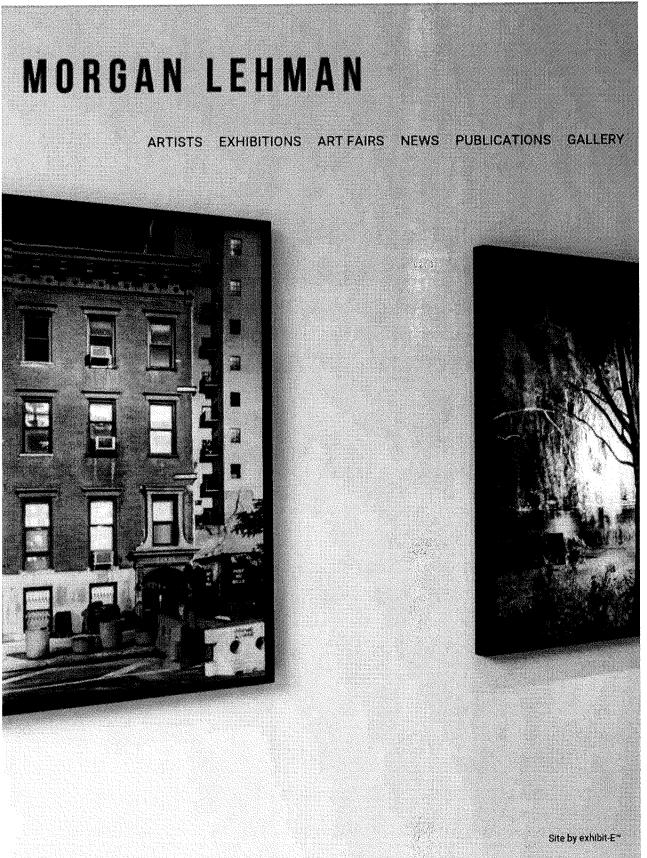
### **CONTACT INFO**

David S. Alee Ph 917 923 9774 Email contact@davidallee.com

Morgan Lehman Gallery
Ph 212 268 6699
534 W 24th St, New York, NY 10011
Email jay@morganlehmangallery.com, sally@morganlehmangallery.com

www.morganlhmangallery.com/exhibitions/david-s-allee4?view=slider#7.







Feature Shoot

## Uncanny Photos Taken in the Dead of Night - Feature Shoot

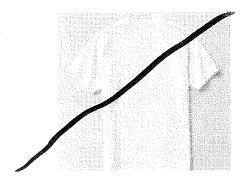
Art We All One, 2016 © David Allee, courtesy Morgan Lehman Gellery.

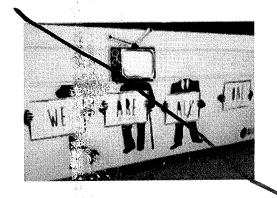
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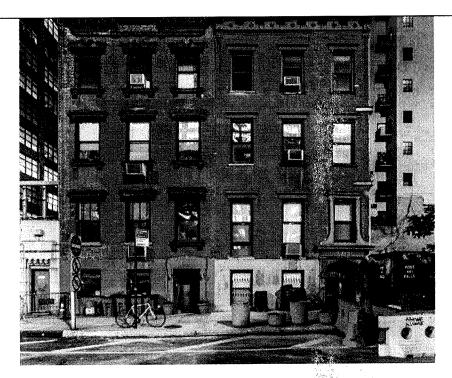




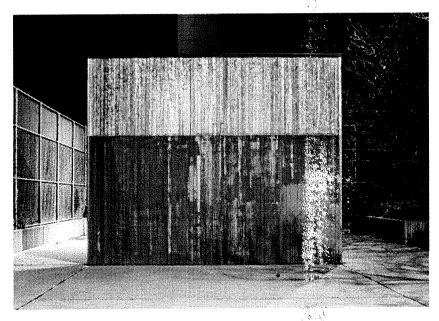
### Related images







©David S. Allee, Art We All One, 2016 Dye sublimation metal print 45 x 48 in. Courtesy of Morgan Lehamn



©David S. Allee, Ball Court, 2016 Dye sublimation metal print 45 x 60 in, Courtesy of Morgan Lehman



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bowties38 My favorite of David Allee photography.

JANUARY 21



Follow









joshstamberg #62milliongirls

♥ 11 likes

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mbradywebb Tell my sister to get an Instagram account for tonight's @pearljam adeetz786 @joshstamberg your at the #GlobalCitizen oooo man wish I can get to meet u